

SERIAL NUMBER <div style="text-align: center;">09/342,926</div>	FILING DATE <div style="text-align: center;">06/30/99</div>	CLASS <div style="text-align: center;">355 358</div>	GROUP ART UNIT <div style="text-align: center;">2722 2624</div>	ATTORNEY DOCKET NO. <div style="text-align: center;">862.2906</div>
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APPLICANT

KAZUYOSHI SUMIUCHI, KAWASAKI-SHI, JAPAN.

****CONTINUING DOMESTIC DATA*******
 VERIFIED
 st

****371 (NAT'L STAGE) DATA*******
 VERIFIED

****FOREIGN APPLICATIONS*******
 VERIFIED JAPAN 10-187741 07/02/98

 st *yes*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/29/99

Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no			STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<input checked="" type="checkbox"/> Met after Allowance		JPX	9	15 6	4
Verified and Acknowledged <u> <i>st</i> </u> <i>yes</i> <div style="display: flex; justify-content: space-between; font-size: x-small;"> Examiner's Initials Initials </div>							

SEE CUSTOMER NUMBER: 005514

ADDRESS

TITLE

IMAGE PROCESSING APPARATUS AND METHOD

FILING FEE RECEIVED <div style="text-align: center;">\$1,124</div>	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<div style="font-size: small;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </div>
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